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EDITORIALS

Region, Metropolis and Form of Government: A Problem for Health Leadership

WHEN the Brooklyn Dodgers and New York Giants moved across the Continent to California they unwittingly provided a striking symbol of the virtual flood of migration that has been such a marked feature of American life in recent decades. This movement of people has led not only to dramatic regional changes, but equally to differential growth of cities and their surrounding areas. Our cities have grown rapidly over the past hundred years, but it is in our century that the dramatic evolution from the great city to the metropolitan area has taken place. On the eve of the Civil War, only New York (that is, the present five boroughs) was passing the million mark in population. By the turn of the century, however, New York with its adjoining suburbs contained a population about equal to that of the entire United States a hundred years earlier. But even by 1900, the country had only four metropolitan cities containing more than one million inhabitants, and only 15 others with populations between 250,000 and one million. These metropolitan areas contained 21 per cent of the total population. By 1950, there were no less than 14 metropolitan areas of more than a million

inhabitants, another 19 with populations over half a million, and, altogether, 151 such areas with populations of 100,000 or more.¹ By the year 2000, it is forecast, the United States may have 320 million people, and one-third of these will live in ten super-metropolitan areas. Altogether it is estimated that urbanites will make up about 85 per cent of the population.

Clearly, such vast urban growth adds a new dimension to American society, and throws into high relief opportunities as well as problems for the future. There can be no doubt that if these trends continue, urbanism of the metropolitan type will dominate all aspects of American life. In fact, in some respects the future is already here. Journalists and others have turned the "exploding metropolis" into a cliché, and have made us all familiar with the current roster of metropolitan ills: traffic congestion, housing needs, the frictions engendered by shifting populations, the haphazard utilization of land, the wasting of water resources and numerous others. These maladies, however, even though they are the problems that confront us immediately, are in general not the fundamental problems. Rather they are symptoms reflecting an accumulation of lags in the coordination of the various functions of the metropolitan community. These lags are in turn the consequence

of sporadic, uncoordinated, haphazard community growth. The fact is that the metropolitan community just grew like Topsy—or if one wishes to be polite, one can say it evolved over a period of several generations—and we now face the consequences.

Moreover, this growth of the metropolis has occurred along various dimensions, not only vertically and horizontally, but equally in terms of economics, communications, and various services such as water supply, sewage disposal, recreation, and others. For better or worse, midcentury America is organized and operates as a system of metropolitan centers, each located in a specific geographic, economic and social setting. Complicated and diverse ties exist between the metropolis and the region in which it is situated. One of these, the water supply problem, has received a good deal of attention lately and is likely to require even more attention in the future.

These situations can be viewed with alarm or we can see them as opportunities for action. One thing is clear. The developments described above challenge many of the concepts held by public health workers. For example, what will remain of local government and its institutions if the nature of locality is radically altered? And how will this affect the institutions concerned with public health? How about current concepts of the community? Are they valid in this new framework of metropolis and region?

Haphazard growth has meant poor community development and many difficult problems. The metropolitan community of the coming decades will need to be carefully planned within a regional framework so that there may be more efficiently coordinated patterns for such services as transport, water and sewerage utilities, medical care, and others. Here is an opportunity for research and application. The time for professional

myopia and the limited vision of local concern is long past. Even the local problems are today seen more realistically when viewed in a perspective which goes beyond the local area to the regional and national level. Responsible leadership in public health at all levels of national and community life must take cognizance of the facts and take action to deal with the impact of urbanism and metropolitan growth. Creative action for humane community life is a major need of our time and the future will judge us for our contribution toward this end.

1. Pickard, Jerome P. *Metropolitanization of the United States*. Research Monograph 2, Urban Land Institute, Washington, D. C., 1959; Duncan, Otis D., et al. *Metropolis and Region*, Baltimore, Md.: Johns Hopkins Press, 1960.

A Word of Thanks

In the course of the year the Editor of the Journal has enjoyed the aid and guidance of a considerable group of people, the largest number of whom are members of our Association. Some have assisted in reviewing books, others have prepared guest editorials or suggested topics for such treatment, while still others have reviewed manuscripts and have helped the Editor in arriving at a decision as to their suitability for publication. We are aware that public health workers tend to carry on more than one activity at a time, and time is therefore precious. For this reason we are exceedingly grateful to all those who have so willingly given of their time and knowledge. As we complete another volume of the Journal, we wish you well for the coming year, and we expect to enjoy the cooperation of all those who have helped so far, as well as of others whom we hope to involve in 1961 in making the Journal more than ever the organ of American public health.